



## State of New Jersey

### DEPARTMENT OF HEALTH AND SENIOR SERVICES

OFFICE OF EMERGENCY MEDICAL SERVICES

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Acting Governor

GEORGE T. DIFERDINANDO, JR., MD, MPH  
Acting Commissioner

### NEW JERSEY EMERGENCY MEDICAL SERVICES COUNCIL

#### MEETING MINUTES

OCTOBER 10, 2001

**Members/Alternates Present:** Mr. William Blanken, Mr. Jesus Cepero, Ms. Terry Clancy, Mr. Ron Czajkowski, Mr. James Davidson, Mr. Rob Clawson, Ms. Mary Ann Ferrara, Mr. Martin Hogan, Dr. Ernest Leva, Dr. David Livingston, Mr. H. Mickey McCabe, Ms. Deborah Murante, Col. Peter O'Hagan, Dr. James Pruden, Mr. Craig Reiner, Mr. Robert Resetar, Mr. Fred Steinkopf, Ms. Deborah Timpson, Dr. Jennifer Waxler, Ms. Susan Way, Mr. Richard Bailey

**Members Absent:** Dr. George DiFerdinando, Mr. Robert Hansson, Dr. Steven Marcus, Senator Joseph Palaia

**OEMS Staff:** Ms. Bonnie Anderson, Ms. Traci Anderson, Dr. John Brennan, Mr. William Duffy, Ms. Nancy Kelly-Goodstein, Mr. Chuck McSweeney, Ms. Darcy Saunders, Mr. William Dougan, Ms. Linda Taglairino

**Visitors:** Mr. Alfred Lincks, Mr. Stuart Weiss, Mr. Richard Butler, Mr. Frank Goodstein, Mr. Terry Hoben, Mr. Howard Meyer, Ms. Julie Aberger, Ms. Ruth Bertagni, Ms. Bonnie S. Brazill, Mr. Louis Sasso

***Dr. Pruden called for a moment of silence for all of those who lost their lives in the events of September 11<sup>th</sup>.***

Dr. Pruden then acknowledged the incredible inspirational response by the members of the prehospital, emergency response, firemen, police and the NJ.

There will be a meeting Saturday, October 13, at Middlesex Fire Academy to see if we can enhance our responses to situations such as September 11.

#### BLS COMMITTEE

Ms. Ferrara stated that in light of the recent events, we are looking forward to the meeting on Saturday. Only a handful of people have expressed an interest in serving on the BLS committee. The first order of business should be to develop a mission statement.

Motion to Accept Report, Second, Discussion-none  
Report Accepted.

#### EMS COMMUNICATIONS

Mr. Robert Resetar reported that the committee met on September 4, at which time they entertained a name change, from the EMS Communications Committee to the EMS Communications Committee. A group was selected to review the NJ Guide Cards. Several specific changes have been identified including CPR, and public access defibrillation.



NEW JERSEY  
*Many Faces. One Family.*

Louis Sasso has been chosen to be Mr. Resetar's alternate. He is the Committee's Deputy Chairperson. At the September 4<sup>th</sup>, meeting it was suggested that dispatch centers review their FCC licensing. The FCC is in the process of changing the licensing process across the country. Anyone that does not update their licenses using the FCC website, may lose their FCC license. We recommended that all the dispatch centers look at all their licensing to make sure they are set up with the ULS, (Universal Licensing System).

The Communications Committee also had an emergency meeting yesterday, (10/09/01) at Robert Wood Johnson to discuss the events at the World Trade Center on September 11<sup>th</sup>. They did an overview of the New Jersey memorandum of understanding between the University of Medicine and Dentistry and New York City, which has been in place since 1993 as a result of the attack on the World Trade Center. Suggestions for

improvement will be forwarded to Mr. McCabe's Committee's for review. Mr. Resetar said that as a whole, New Jersey's communications were far better than that which occurred in New York City. New York sent resources from Rochester and Syracuse into New York City and once there communication was a problem because they all had individual radio systems. In New Jersey, we have had an EMS statewide communication plan since the early 1980's and that gave us the capability to communicate with probably greater than 85% of the ambulances and paramedic units that we sent to New York City.

The radios scheduled to be distributed to the trauma centers have arrived at State Police. The installation details are being worked out. The State Police are currently focused on restoring their system affected by the collapse of Tower 2.  
Motion to accept-Second

### **Discussion:**

Dr. Pruden asked that if the Communications Committee would be participating in the meeting on Saturday, Mr. Resetar responded yes.

A question was asked if the FCC licensing process would include police departments. Mr. Resetar responded that letters should be going out to all the holders that the FCC has on file. The licensing documents will reflect the information on your current license.

Ms. Ferrara asked if the Communications Committee is responsible for making recommendations for the statewide frequencies that are used in emergency services. Mr. Resetar stated that they have worked with the Department of Health and Senior Services on the EMS Communications plan and we were active participants in its last revision in 1999. Mr. Resetar stated that the Department of Health and Senior Services is the licensing group that approves or disapproves the licenses for Emergency Medical Services.

Ms. Ferrara asked if the EMS Communications Committee is involved with the state disaster plan. Mr. Resetar responded that the State Police is responsible for the disaster plan, and the Communications Committee participates in the planning process.

Report accepted.

### **ANNOUNCEMENTS**

Dr. Pruden announced that Mr. John Barlas from the American Association of Retired People (AARP) has relocated to Florida, and therefore no longer a member of the EMS Council. OEMS has contacted the AARP for requesting a representative.

Also, new to the EMS Council is Ms. Terry Clancy who is representing volunteer EMTs.

### **EMT TRAINING FUND**

Ms. Murante reported that they have not met recently. Upcoming activities will include review of requests for increased CEU reimbursements, and a review for projects focusing on recruitment and retention.

Motion to Accept-Second-Discussion-none

Report Accepted

### **MICU ADVISORY COUNCIL**

Dr. Pruden stated that MICU Advisory Council met on September 10<sup>th</sup>. The items discussed included Rapid Sequence Induction (RSI) as apparently not accepted by the anesthesiology community. The Medical Command Video for base station physicians has been completed and reviewed by the MICU Council. The next step is for it to be distributed to each of the medical directors. All the physicians that provide medical control in the state as well as physicians coming into New Jersey have to review the video.

Information was presented about an upcoming HAZMAT course. Ms. Susan Way reported on the regulations and how they are moving through the process. They must be reviewed by OEMS staff, the legal department, Commissioner's office, finally the Health Care Advisory Board).

Dr. Pruden stated that we participated with the NJ Hospital Association in revising the hospital diversion guidelines. A more detailed report to follow.

Motion to accept-Second

### **Discussion**

A question was asked to elaborate on the RSI program. Ms. Way reported that RSI would need to go through the rule making process before it could be implemented. The training program developed and can proceed forward, but the skill cannot be used. The regulations are written and are in a somewhat lengthy rule making process which may take even longer because resources directed towards 9/11. This is a proposal phase. If the Department receives a significant number of negative comments on a particular component of the regulation, just that section could be held back as long as the component doesn't topple down the whole regulation. If we feel there is need for further review of a specific, section we can hold that section back or publish it for additional public comments.

There is controversy in the medical community, over the use of RSI, and as a result some of the medical directors will accept the procedure and others will not. The aeromedical crew already has the capability to perform RSI. In the new ACLS guideline intubation, in general, is of particular concern on a national level.

Report Accepted.

### **NJ PIES**

Dr. Marcus sent his regrets via Ms. Susan Way. No report.

### **NJ OFFICE OF EMERGENCY MANAGEMENT**

Dr. Pruden commented that N.J. Emergency Management personnel were incredibly involved and effective in their response to the World Trade Center attacks. Members of the NJ Task Force (search and rescue team) went through the same emotional roller coaster as everyone else. Everyone felt they could have done more and wanted to do more. UMDNJ Behavior Science Section has set up a phone number (1-888-WTC-NJTF) for rescue workers, iron workers, police, EMS personnel or their family members who are having trouble dealing with the events of 9/11. Dr. Pruden encouraged everyone to post that number on their work and take advantage of the service, offered at no charge.

### **NJ STATE FIRST AID COUNCIL**

Ms. Mary Ann Ferrara reported that greater than 90% of the BLS services that responded over the past few years (World Trade Center, Hurricane Floyd) have been volunteers. At the NJSFAC annual convention, which is scheduled for next week, Jim Schatzek, from the New Jersey State Critical Incident Management (CISM) will be there.

Motion to accept-Second-Discussion-none

Report Accepted

### **EMSC ADVISORY COUNCIL**

Dr. Leva advised that at the last EMSC Advisory Council Meeting, the Standing Order/Radio Failure Protocols were revised and will be released shortly.

The second item to report is the Third Annual EMSC Conference will be on Sunday, May 5<sup>th</sup> and Monday, May 6<sup>th</sup>, in Mount Laurel at the Radisson Hotel. Please plan on joining us.

Motion to accept-Second

### **Discussion**

We are still in the process of finalizing the various topics and will try to offer Continuing Medical Education credit for physicians. Last year 170 people attended. Mr. Steinkoff stated that a Saturday and Sunday format might be better for the prehospital providers. Ms. Kelly-Goodstein mentioned that

conference will also target school nurses, who would be adversely effected by a weekend only format. The Sunday-Monday format may accomodate everyone.

Report Accepted

## LEGISLATIVE COMMITTEE

Mr. Martin Hogan stated that he did not have a formal report. It is rumored that the HCFA fee schedule regulations may be published within the next 30 days. A lengthy review process is expected.

NJ EMS Coalition has studied Senate Bill S1350 introduced in August by Minnesota Senator Mark Hadden. The S1350 requires that the Medicare fee schedule be based on the national average cost of providing the service as opposed to the fee schedule that was devised by the NRC. At this point the coalition is supporting that bill, while the companion bill is being proposed by Congressman Alan Potent.

Motion to accept-Second

### Discussion

Dr. Pruden stated that as priorities change, this issue has fallen off the “radar screen.” It has the potential to be very destructive to the system as we move forward and should be monitored.

Report accepted

## OPERATIONS COMMITTEE

Mr. McCabe reported that the operations includes disaster planning. He thanked everyone who responded on September 11<sup>th</sup> and gave so freely of their time. Mr. McCabe acknowledged Dr. Pruden’s involvement on the 11<sup>th</sup>.

Mr. McCabe asked if anyone has participated in any critiques with any elected official or with the candidates for Governor. Dr. Pruden stated that Congressman Pasquale had a meeting about 2 days ago. Ms. Ferrara stated that Bergen County had met to discuss the response to biological incident. Mr. McCabe stated that, at the conclusion of the program on Saturday, we will have a “wish list” for reinforcements for prehospital EMS. It is very important that we educate both gubernatorial candidates as to the role of EMS. Approximately, 180 people have been invited to participate Saturday. This will be a very productive, upbeat meeting and we hope to capture everything that happened from one end of this state to the other relative to the September 11<sup>th</sup> assault. Suggestions will be made as to how to make things better.

Motion to accept-Second

### Discussion

Did the procedure for personnel to respond work properly? Reports have been made that a number of responders just took off on their own without going through channels. Mr. McCabe responded that by and large it went by the book, but there were some communication problems, as a number of radios were on top of the WTC. Mr. Frank Goodstein stated that the majority of personnel were organized and followed procedure. There were a few who freelanced, and some were sent back from NYC. Mr. Resetar added that in 1993 we had over 100 agencies across NJ that freelanced, but for the 9/11 we had less than 10. Mr. McCabe stated that at a recent meeting with Hudson County providers, there is a plan, but there are a number of volunteer squads that are not part of the NJSFAC and, therefore, may not be aware of the plan. There was some confusion as to dispatch (local police departments versus OEM). The evacuation via boats was never anticipated. Mr. McCabe was told that areas were able to maintain their local coverage. Mr. Goodstein stated that personnel that stayed behind maintained their daily 911 coverage. At a Communications meeting yesterday, a chart was presented that showed the number of 911 calls made on September 11<sup>th</sup>.

Mr. Steinkopf wanted to emphasize that, by and large, the response from the NJ State First Aid Council involved people who took time off from work. In many instances towns had better coverage because more people were waiting at their stations.

How do squads that are not part of the NJSF Aid Council fit into the plan? The response from Mr. Goodstein was mobilization with the County Office for Emergency Management.

Just for clarification, it was underscored that for the 10-day period, not including day one, we sent 338 BLS ambulances to NYC in task forces of 15 ALS. In addition, we had the equivalent of 134 ALS units. (NYC required transport ALS)

Mr. McCabe added that the proprietary ambulances put aside their paying jobs that day and they responded in full force. All non-essential transportation was put on hold and everyone responded.

## **TRAUMA CENTER COUNCIL**

Dr. David Livingston reported that the Trauma Center Council met between Labor Day and the WTC disaster at St. Joseph's Hospital & Medical Center in Paterson. There is a new Trauma Center Director in Jersey City, Dr. Paul Bauer.

Three issues have come out of the Trauma Center Council. One is the Trauma Registry which has been running on Cales software. Another software was reviewed, and since there is no mandate from the State as to which to use, we continue to use the Cales Software. There is concern about the mandate to get trauma data from the non-trauma center hospitals in NJ. We all agree that is a good idea, but don't know how it will be accomplished. The weaknesses of the trauma system may be the lack of data from non-trauma center hospitals and that the definition of what is a trauma patient and the trauma triage guidelines do not have the force of regulation.

Another issue of concern is Driving Under the Influence (DUI) legislation. Finally, the trauma directors were disturbed in general about the meeting going to have about Trauma/EMS Systems.

Our position is that trauma does not stop at the ambulance bay or the emergency department door. Trauma care is a continuum that goes from the field to rehabilitation.

Motion to accept-Second

### **Discussion**

If the insurance companies were not to pay because the injured individual was under the influence of alcohol, could you then turn to the uninsured motorist fund? Dr. Livingston replied that he did not know, but that is a three-year plus process. If alcoholism is viewed as an illness, how can insurance companies walk away from the treatment of an illness and a patient with injuries? Workman's Compensation may deny your claims if the individual is drinking on the job. If the hospital does not test for blood alcohol, the opportunity to offer treatment may be missed. Dr. Waxler stated there had been a meeting with Dr. Vitale at University Hospital this week, and he was interested in potentially rewriting the bill.

There was a bill reported to this Council some time ago that would require any legislation that may affect EMS come to the Council for input. Dr. Paterson stated that he understands that the bill went through the process and then it sat on the Governor's desk. This would be something the Council will support. Report accepted.

## **PROFESSIONAL EDUCATION**

Mr. Rob Clawson reported that Mr. Robert Dinetz's report will be attached to the minutes. With regards to the proposed paramedic didactic site at Hudson County College, and the College at Jersey City Medical Center, expect that they will spend the rest of this year and the early part of next year finalizing planning, put personnel in place and then submit a formal proposal to our office.

OEMS received a letter from the American Safety and Health Institute requesting NJ to accept their Advanced Cardiac Life Support (ACLS) program.

## **IMPLEMENTATION OF THE NATIONAL EMT BASIC EXAM**

The EMT instructors have nearly completed the exam process and we are taking the next step of using the National Registry exam for our basic students. Hopefully, by the December meeting, we will have firm dates on our plans. Out of approximately 300 EMT instructors, they have all done relatively well on the exam, with only 40 or so that did not pass.

EMS is working on our web-site to make it more of a searchable data base for CEU course information, etc.

Finally, in regards to Hunterdon Medical Center (HMC) and their Laryngeal Mask Airway (LMA) request to train EMTs in the procedure. We had a written proposal of their training program, but have not as of yet received it. We had several discussions with the staff from HMC and they stated they still want to conduct the training, but we have not received anything in writing. We sent off a letter this month stating that since we have not heard from them, we will consider the matter closed. We have heard rumors that squads have brought the LMA in preparation for using this device. The device is not approved and EMTs should not be using it.

Motion to accept-Second

### **Discussion**

EMT basic students will eventually have to take the National Registry exam; it is just a question of when (probably early 2002), as we are replacing exam with the National Registry exam. Mr. Steinkopf requested clarification on testing numbers.

In light of September 11<sup>th</sup>, the only EMS personnel that are requested to put their name, address and social security numbers on their cards are from Ferrara suggested the concept of new cards with a certification number and picture and level of certification. Mr. Clawson responded that use of the Security number is voluntary.

Report accepted.

## **OEMS**

Ms. Way wanted to add her thank you to not only the people who went into New York City, but those that stayed home, all were heroes.

Likewise, the Department and our office are in a “lessons learned” mode, focusing on where we can improve. The Department did receive some funding for bioterrorism and it has not yet been determined how that money will be dispersed. Ms. Way has contacted Mr. James S. Blumenstock, Senior Assistant Commissioner for Public Health Protection and Prevention.

Diversion: Ms Way reported that there was a meeting on September 25<sup>th</sup> at the NJ Hospital Association (NJHA) where the NJHA presented their draft to the Full House.” The meeting was very interesting, because specific hospitals highlighted their “best practices” for dealing with an overloaded hospital.

OEMS is pursuing vendors for diversion software. Of the two products we have seen so far, one seemed to meet our immediate needs very well and need very little tweaking. The second product would need a lot more tweaking, but was more sophisticated with add-on modules that would be very useful in light of 9/11. One module was an epidemiological component that would track in real time flu epidemics, etc. Another component was bed capacity which was critical on 9/11. We will keep you posted. The commissioner is very enthusiastic about this project. We hope to get at least a pilot running in the next few months.

Finally, we are going through the EMS/trauma assessment project this afternoon. We did receive word that EMSC received \$45,000 for the project. The project will unfold in the next couple of months and hopefully be complete by December 31<sup>st</sup>. The grant was constructed so that we could spend some money on related projects. In the grant application, we said any money left over would be used as investigatory money for the trauma registry. It was a large sum of money, but it might be enough to get us started.

Motion to accept-Second-Discussion-none

Report accepted

## **PUBLIC EDUCATION COMMITTEE**

Dr. Waxler reported in light of recent events there will be a meeting in the next couple of months. Perhaps we could construct one bulleted sheet that can be prepared for the elected officials in all levels of government. Dr. Waxler was unsure of a vehicle that can be utilized in the League of Municipalities meeting in November to promote awareness of the Emergency Medical Services function and what role it played. In order to pursue funding, we would need the support of elected officials.

Dr. Pruden agreed with Mr. McCabe that we try to get on the agenda for the League of Municipalities meeting, but if unable to, we should try to at least have a brief presentation at their meeting. Ms. Kelly-Goodstein said she would find out. Mr. Steinkopf stated that the NJ State First Aid Council and the Paramedic Association will have booths there.

Dr. Pruden suggested to Ms. Murante that maybe public and medical education regarding bioterrorism may be something that the EMT Training Committee could look into. Ms. Murante agreed. A great deal of information is now available through the internet, but you need to be sure the information is valid.

Motion to accept-Second-Discussion-none

Report accepted

Ms. Way then introduced the new staff members at OEMS, Ms. Traci Anderson who is part of the EMSC staff, and Mr. William Dougan, who is part of the licensing staff will be primarily out in the field.

## **NOMINATION COMMITTEE**

Dr. Jennifer Waxler stated that we have to elect a new Vice Chairman this year, since Mr. McCabe has fulfilled his term. Dr. Pruden selected Mr. M chair the nominating committee. Ms. Mary Ann Ferrara and Mr. Jesus Cepero also volunteered for the committee.

## **2002 MEETING SCHEDULE**

Ms. Kelly-Goodstein reported that the proposed 2002 meeting schedule is as follows: March 13, June 12, September 18, December 11. If anyone k conflict with these dates, please advise ASAP.

## **NJ HOSPITAL ASSOCIATION DIVERSION/BYPASS**

Mr. Ron Czajkowski stated that 61 New Jersey Hospitals treated 1,019 patients as a result of the World Trade Center Disaster. 52% of the patients a were seen at Hudson County Hospitals.

Mr. Czajkowski passed out “The Full House” document, as a work in progress. The original document was published by the NJ Hospital Association ago and distributed to hospitals. This version will serve as a model, not standardizing communications, suggesting a better process for limiting the o of diversion, and also suggesting for how to manage diversion should it occur.

We had a meeting on September 25<sup>th</sup> with about 100 people throughout the state. The “best case” model was presented by six different hospitals

### **Discussion**

We thank the NJ Hospital Association for its efforts in updating this document. There are two major outcomes of this document. First, the hospitals bypass and divert is a courtesy and such, it puts the EMS providers in a very difficult position from time to time. Secondly, the hospital staff, before the divert, need to understand the impact of the divert. That point was brought out through the sub-committee meetings and through the presentation weeks ago in Princeton. Every hospital chief executive in the state, was invited to the 9/25 meeting. It was clear from the best practices session that hospitals with the best practices had the total cooperation of the hospital. It was recognized as a system problem that needed to be solved and not just emergency room problem.

Ms. Ferrara stated that the NJ State First Aid Council next Thursday, Friday, Saturday and Sunday will be hosting their annual convention. The Wea Mass Destruction sessions are full.

Mr. Steinkopf stated that for informational purposes, Ms. Sue Caputo has taken a new position in Atlantic Health System. She is no longer in the M Department, so he does not know how that will impact on her participation here. Dr. Pruden added that Ms. Caputo has been an incredible resource regards to legislation, we now need to explore other ways of getting that very valuable and critical information to us. Suggestions are welcomed.

For informational purposes Col. O’Hagen reported that his office just finished the annual seatbelt survey in NJ and we are now at 77% of our drivers seatbelts up from 74% last year. The national average is 72%. Another area that might be of interest is that we have over 700 child car seat technicians in the state of NJ and yet we are still finding 4 out of 5 car seats improperly installed. A NJ Transit bus has been converted into a safety cruiser. The bus i with a driver simulator, every type of car seat that meets standards, breathalyzer and fatal vision goggles. It will be available to go to schools, malls,

Howie Meyer reported on A3351 and S2417. This body came out in support of A2218, that requires impact statements on any proposed regulations volunteer fire and EMS services. A2218 passed both the assembly and the senate without one negative vote being cast and then was vetoed by form Governor Christine Todd Whitman because of the input from some Departments that said it would slow down the regulatory process.

A3351 and the companion bill S2417 then passed the Assembly went to the Senate, where some minor changes were made. A3351 and S2417 have yet to be combined. The NJ State First Aid Council has started a letter writing and phone campaign, which we expect to bring a lot of attention to this matter. Mr. Meyer requested that the EMS Council also get involved in support of this legislation. Dr. Pruden then requested Mr. Meyer to provide Ms. Kelly-Goodstein with copies of the bill. Ms. Kelly-Goodstein will then send it to the members of the Council, and members of the Executive Committee so a letter of support could be generated.

Dr. Pruden asked if there was an EMS Council member that has interest in legislation. Ms. Caputo will forward through Mr. Steinkopf what she has research. Mr. Meyer will also contribute info.

Anyone who has not yet responded about their attendance on Saturday, please see Mr. Frank Goodstein to register. Dr. Waxler noted that the Saturd was in conflict with the NJ ACEP Meeting.

Motion to Adjourn